ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION		 	 	
O.I.P.E. CLASSIFIER		49	10/25/00	
FORMALITY REVIEW		105655	13/2	
RESPONSE FORMALITY REVIEW		1.60.32	1993	

INDEX OF CLAIMS

~	Rejected	N	Non-elected
	Allowed	· · · · · · · · · · · · · · · · · · ·	Interference
-	(Through numeral) Canceled	_	Appeal
÷	Restricted	_	Objected

÷ Hestricted 0 Objected								
Claim Date	Claim I	ate	Claim	Date				
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(2)VYVVV	71		121	 				
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	73 74	 	123					
25 / V V V	75		125					
	76		126					
27 V V V V	77 78		127					
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	80		130	++++++++++++++++++++++++++++++++++++				
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44	94	┠╏ ┼┼┼┼┤┤	144	++++-				
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46 47	96		146					
48	97 98	▎ ▎	147	+++++				
49	99	╒┋┋	149	╫╫┼┼┼				
50	100		150					

If more than 150 claims or 10 actions staple additional sheet here

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